

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 20 10 23 AM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) First Union Corporation Employees Good Government "F" Fund	2. FEC IDENTIFICATION NUMBER C00012518
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 381 South College St, Attn: B. Bradley	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Charlotte, NC 28208-0630	

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>06/01/99</u> through <u>06/30/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 66,603.21
(b) Cash on Hand at Beginning of Reporting Period	\$ 89,646.00	
(c) Total Receipts (from Line 19)	\$ 14,440.54	\$ 89,440.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 104,086.54	\$ 147,843.71
7. Total Disbursements (from Line 30)	\$ 26,000.00	\$ 68,857.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 79,086.54	\$ 79,086.54
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Rufus F. Beatty

Signature of Treasurer

Rufus F. Beatty

Date

7-19-99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X
(revised 5/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE First Union Corporation Employees Good Government "F" Fund	REPORT COVERING PERIOD		
	FROM 06/01/89	TO 08/30/89	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	7,843.00	22,307.00	11(a)(9)
ii. Unitemized	6,584.99	57,092.15	11(a)(9)
Total (add i and ii) >	14,427.99	89,399.15	11(a)(9)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a ii, b and c) >	14,427.99	89,399.15	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
16. Offers To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	12.55	41.35	17
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	14,440.54	89,440.50	19
20. Total Federal Receipts (subtract line 18 from line 19) >	14,440.54	89,440.50	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(9)
ii. Non-Federal Share	0.00	0.00	21(a)(9)
b. Other Federal Operating Expenditures	0.00	107.17	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	107.17	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	25,000.00	68,785.08	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	25,000.00	68,892.17	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	25,000.00	68,892.17	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	14,427.99	89,399.15	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	14,427.99	89,399.15	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	107.17	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	107.17	37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 10
FOR LINE NUMBER 11

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code CHARLES L ABBITT JR 8244 BONNIE BRIAR CIRCLE CHARLOTTE, NC 28277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Amount of Each Receipt This Period</p> <p>60.00</p> <p>Deduction (\$25.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code FRANCIS G ADDISON IV 841 PARK SLOPE DRIVE CHARLOTTE, NC 28209</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>Deduction (\$20.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code JAMES W AHERN 6031 GRABURNS FORD DRIVE CHARLOTTE, NC 28269</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Amount of Each Receipt This Period</p> <p>60.00</p> <p>Deduction (\$25.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code MELANIE L ALEXANDER 3781 HELICON DRIVE JACKSONVILLE, FL 32223</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>Deduction (\$20.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code MANSON R ALLEY 11477 BASKERVILLE RD JACKSONVILLE, FL 32223</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 276.00</p>	<p>Amount of Each Receipt This Period</p> <p>60.00</p> <p>Deduction (\$24.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code STANLEY THOMAS AUGUST 5528 OLD WELL HOUSE ROAD CHARLOTTE, NC 28226</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CAPITAL MARKETS</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>Deduction (\$20.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code MICHAEL I BALBIRNIE 10730 ALEXANDER MILL DRIVE CHARLOTTE, NC 28277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION SERVICES, INC.</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Amount of Each Receipt This Period</p> <p>60.00</p> <p>Deduction (\$25.00)</p> <p>Semi-monthly</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>320.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code DAVID E BARNICK 227 HARGETT CT CHARLOTTE, NC 28211 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION CORPORATION Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00 (\$25.00) Semi-monthly
B. Full Name, Mailing Address and ZIP Code ROBERT F BOLSTER 33 GREYTHORNE WOODS CIRCLE PHILADELPHIA, PA 19087 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION SERVICES, INC. Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00 (\$25.00) Semi-monthly
C. Full Name, Mailing Address and ZIP Code RICHARD A BOTTHOF 4430 WALDER ROAD NAPLES, FL 34105 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00 (\$30.00) Semi-monthly
D. Full Name, Mailing Address and ZIP Code JOHN J BRADEN 1923 WILD HOLLY LANE CHARLOTTE, NC 28226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION CAPITAL MARKETS Occupation Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 100.00 (\$50.00) Semi-monthly
E. Full Name, Mailing Address and ZIP Code JOHN J BRESNAN 9118 WINGED BOURNE RD CHARLOTTE, NC 28210 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION CORPORATION Occupation Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 100.00 (\$50.00) Semi-monthly
F. Full Name, Mailing Address and ZIP Code ROBERT D BRIDGES 17315 PLAYERS RIDGE DR. CORNELIUS, NC 28031 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION CORPORATION Occupation Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly
G. Full Name, Mailing Address and ZIP Code THEODORE H BROOKS JR 4814 SWILCAN BRIDGE LN S JACKSONVILLE, FL 32224 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00 (\$25.00) Semi-monthly

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code CURTIS J. BROUWER 2518 HOWERTON COURT CHARLOTTE, NC 28270	Name of Employer FIRST UNION CORPORATION Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 50.00 (\$25.00) Semi-monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 300.00		
B. Full Name, Mailing Address and ZIP Code DEBORAH M BROWN 8087 SAN VISTA CIRCLE NAPLES, FL 34109	Name of Employer FUNB Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 240.00		
C. Full Name, Mailing Address and ZIP Code PETER S BROWNE 6270 BRIGHT WATER LANE DENVER, NC 28037	Name of Employer FUNB Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 240.00		
D. Full Name, Mailing Address and ZIP Code JEEP BRYANT 6740 ALEXANDRIA LANE CHARLOTTE, NC 28270	Name of Employer FIRST UNION CORPORATION Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 25.00 (\$25.00) Semi-monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 275.00		
E. Full Name, Mailing Address and ZIP Code JAMIE B. BUCKLAND 1838 WOODMERE DRIVE JACKSONVILLE, FL 32210	Name of Employer FUNB Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 50.00 (\$25.00) Semi-monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 300.00		
F. Full Name, Mailing Address and ZIP Code ROBERT BURTON 15403 BALLANTYNE COUNTRY CLUB DRIVE CHARLOTTE, NC 28277	Name of Employer FIRST UNION CORPORATION Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 240.00		
G. Full Name, Mailing Address and ZIP Code ANDREW C CALHOUN 14401 NEWGATE ROAD MIDLOTHIAN, VA 23113	Name of Employer FUNB Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 240.00		

SUBTOTAL of Receipts This Page (optional)	285.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code ERNEST NICHOLAS DAWAL 12145 EDENWILDE DRIVE ROSWELL, GA 30076</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>60.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code DAVID J. DE GORTER 16302 TOWN HARBOUR ROAD CORNELIUS, NC 28031</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FU MORTGAGE CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code KAREN L DEE 1377 FORESTEDGE BLVD OLDSMAR, FL 34877</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 312.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>22.00</p> <p>(\$28.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code JAMES M DEVANE JR 6540 HADDINGTON LN BUNAWEE, GA 30024</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>108.00</p> <p>(\$60.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code JENNIFER J DOSS 18741 SE RNR RGE RD TEQUESTA, FL 33469</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>(\$28.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code PATRICK J DOYLE 611 FRONT STREET CELEBRATION, FL 34747</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code JACKSON T DUNN JR 1629 PROVIDENCE ROAD CHARLOTTE, NC 28207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>60.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional) 382.00

TOTAL This Period (last page this line number only) 382.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 14 21

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code MICHAEL O EISENBERG 8804 LINDEL LANE VIENNA, VA 22181</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code BRADLEY L. ELKINS 8804 SCOTTFORD COURT ROANOKE, VA 24058</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 604.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>64.00</p> <p>(\$42.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code KENT S ELLERT 8800 TOUCHTON ROAD, #711 JACKSONVILLE, FL 32246</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code DANIEL L EVANS 11670 DUNHILL PLACE DRIVE ALPHARETTA, GA 30005</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 380.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$30.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code LEE M EVANS 8183 GREEN GLADE ROAD JACKSONVILLE, FL 32256</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code BRIAN FISHER 3111 HUNT ROAD OAKTON, VA 22124</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code ANDREW J GAMBLE 2800 JEM COURT CHARLOTTE, NC 28226</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CAPITAL MARKETS</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional) 384.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "P" Fund

A. Full Name, Mailing Address and ZIP Code DAVID M CARROLL 3904 MCGIRTS BLVD. JACKSONVILLE, FL 32219 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 325.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 50.00 (\$25.00) Semimonthly
B. Full Name, Mailing Address and ZIP Code DANIEL A CLARK 14717 STONEGREEN LANE HUNTERSVILLE, NC 28078 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION SERVICES, INC. Occupation Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semimonthly
C. Full Name, Mailing Address and ZIP Code FRANCIS C CLARK 18604 RIVER CROSSING BLVD DAVIDSON, NC 28036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION CORPORATION Occupation Aggregate Year-to-Date > \$ 420.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 70.00 (\$35.00) Semimonthly
D. Full Name, Mailing Address and ZIP Code STEPHEN C COATES 4081 BARCELONA AVE JACKSONVILLE, FL 32207 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00 (\$30.00) Semimonthly
E. Full Name, Mailing Address and ZIP Code DELBERT M CORUM JR 10438 WADLEIGH PL CHARLOTTE, NC 28210 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION CAPITAL MARKETS Occupation Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semimonthly
F. Full Name, Mailing Address and ZIP Code GARY DAVIS 3836 LONGFELLOW TRAIL NE MARIETTA, GA 30062 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 50.00 (\$25.00) Semimonthly
G. Full Name, Mailing Address and ZIP Code REGINALD DAVIS 1318 ANGEL FALLS LANE ATLANTA, GA 30311 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 936.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 190.00 (\$95.00) Semimonthly

SUBTOTAL of Receipts This Page (optional)	470.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code C ELIZABETH C GIBSON 3808 LAXTON COURT CHARLOTTE, NC 28270</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Deduction</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code WAYNE C. GINON 92 PEREGRINE DRIVE VOORHEES, NJ 08043</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Deduction</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code ROBERT A GRAY 3009 ARUNDEL RD CHARLOTTE, NC 28209</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Deduction</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code ROBERT L GRIGG 13905 BW 78 COURT MIAMI, FL 33189</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Deduction</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code MALCOLM D GRIGGS 2201 TRAPPER COURT CHARLOTTE, NC 28270</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Deduction</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code THOMAS P HACZYNSKI 6333 CALLANDER CT CHARLOTTE, NC 29277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Deduction</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code JON D HARKINS 3416 ALMERIA AVE TAMPA, FL 33629</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Occupation</p> <p>Deduction</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>310.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code DON J HARRISON 5004 CROSSBOW CIRCLE ROANOKE, VA 24014</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>80.00</p> <p>(\$40.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code WILLIAM A HAYES 1108 CROFTON SPRINGS DR CHARLOTTE, NC 28209</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code ROBERT E HEALY 3200 PROVIDENCE BRANCH LANE CHARLOTTE, NC 28270</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CAPITAL MARKETS</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code JANET J HEMMING 16210 BARNHARDT RD DAVIDSON, NC 28038</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code ANITA G HERBERT 5401 RANDOLPH RD KANNAPOLIS, NC 28081</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION SERVICES, INC.</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code JERRY M HIGHSMITH 1110 FULLER ROAD ATLANTA, GA 30349</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 750.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00</p> <p>(\$60.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code MARK G HUDSON P.O. BOX 7864 DELRAY BEACH, FL 33484</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional) 420.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code WILLIS J HULINGS III 3707 FOXCROFT ROAD CHARLOTTE, NC 28211</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CAPITAL MARKETS</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code SCOTT L LARJO 8728 BALTUSROD LANE CHARLOTTE, NC 28210</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CAPITAL MARKETS</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>48.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code M TERRY JACKSON 8427 CALLANDER COURT CHARLOTTE, NC 28277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$30.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code BENJAMIN P JENKINS III 4718 POCAHONTAS AVENUE RICHMOND, VA 23226</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 325.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>150.00</p> <p>(\$75.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code THOMAS S JOHNSTON 805 DEER HOLLOW DRIVE MT AIRY, MD 21771</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$30.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code DAVID BRYAN JORDAN 6618 MAGNOLIA BRIDGE RD CHARLOTTE, NC 28210</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$30.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code MICHAEL R JORDAN 197 BRIGHTON RD ATLANTA, GA 30309</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$30.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional) 480.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11 B

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code RICHARD A. KEATING 7201 SETON HOUSE LN CHARLOTTE, NC 28277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CAPITAL MARKETS</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$50.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code PETER J KELLY 5000 CORRIGEN CT CHARLOTTE, NC 28277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code IAN L KENT 4309 S FLETCHER AVE FERNANDINA BEACH, FL 32034</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code JACK B KESTER JR 1404 BELTMOORE DR. CHARLOTTE, NC 28207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code MARTHA T LANAHAN 1110 NICHOLSON RD JACKSONVILLE, FL 32207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code BARBARA L LAUGHLIN 818 MUSEUM DRIVE CHARLOTTE, NC 28207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$50.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code ALICE L LEHMAN 5547 WYNFAIRE LN CHARLOTTE, NC 28210</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 276.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional) 430.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER 11

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KEITH D LEMBO 3641 ARBORWAY CHARLOTTE, NC 28211	FIRST UNION CORPORATION	Payroll	80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Deduction	(\$30.00)
Aggregate Year-to-Date > \$ 360.00		Semimonthly	
JAMES M LITTLE 3867 CHICORA WOOD PLACE JACKSONVILLE, FL 32224	FIRST UNION SERVICES, INC.	Payroll	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Deduction	(\$50.00)
Aggregate Year-to-Date > \$ 600.00		Semimonthly	
HUGH C LONG 8023 EAST BLVD DR. ALEXANDRIA, VA 22308	FUNB	Payroll	188.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Deduction	(\$84.00)
Aggregate Year-to-Date > \$ 1,008.00		Semimonthly	
MARY T MACK P O BOX 128 FORT MILL, SC 29716	FIRST UNION SERVICES, INC.	Payroll	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Deduction	(\$25.00)
Aggregate Year-to-Date > \$ 300.00		Semimonthly	
MARK B MAHONEY 222 CHEROKEE RD CHARLOTTE, NC 28207	INSTITUTIONAL DEBT MGT, INC	Payroll	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Deduction	(\$20.00)
Aggregate Year-to-Date > \$ 224.16		Semimonthly	
JOHN P. MATSON P.O. BOX 4294 VIRGINIA BEACH, VA 23454	FUNB	Payroll	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Deduction	(\$25.00)
Aggregate Year-to-Date > \$ 300.00		Semimonthly	
RANDALL L MAYES 807 TRENTON WOODS AVE GREAT FALLS, VA 22066	FUNB	Payroll	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Deduction	(\$30.00)
Aggregate Year-to-Date > \$ 360.00		Semimonthly	

SUBTOTAL of Receipts This Page (optional) \$28.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code JAMES E MAYNOR 3229 MINTRIDGE RD CHARLOTTE, NC 28227</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FU MORTGAGE CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 380.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$30.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code CHRISTOPHER J MCCOMISH 4316 SUNNYBROOK DRIVE NASHVILLE, TN 37205</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 210.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>30.00</p> <p>(\$15.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code SHANNON W MCFAYDEN 2200 PINWOOD CIRCLE CHARLOTTE, NC 28211</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION SERVICES, INC.</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code PAUL V. MELLINI 921 LIVE OAK AVE N E ST. PETERSBURG, FL 33703</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$30.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code DEANNA K MERRILL 1308 CANDLE CT CHARLOTTE, NC 28211</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code TERENCE B MESSMER 3310 FOXRIDGE RD CHARLOTTE, NC 28228</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code CARLOS A MGOYA 888 BRICKELL KEY DRIVE APT-2910 MIAMI, FL 33131</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$50.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code JERRY M MILLER JR 11726 OAKLAND HILLS PLACE CHARLOTTE, NC 28277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code JAMES R MORTIMER 3455 BRIDLE TRAIL SE MARIETTA, GA 30067</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code MALCOLM Y MURRAY JR 25016 SHEARWATER POINT DR CORNELIUS, NC 28031</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 345.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>130.00</p> <p>(\$65.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code R. PATRICK MURRAY 2597 NW 53RD STREET BOCA RATON, FL 33498</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>(\$30.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code KETH L MYERS 16824 MCCULLER'S CT. CHARLOTTE, NC 28277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code RAYMOND T NASSER 14819 FELBRIDGE WAY MIDDLETHIAN, VA 23113</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 455.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>75.00</p> <p>(\$35.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code HUMBERT S NELLI 3900 BLACK BYCAMDRE DR CHARLOTTE, NC 28226</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code FRANK D NEWMAN 1318 BEAR ISLAND DRIVE WEST PALM BEACH, FL 33409 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly
B. Full Name, Mailing Address and ZIP Code MARGARET B NORRIS 6978 BRADSHAW RD SALEM, VA 24153 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 252.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 42.00 (\$21.00) Semi-monthly
C. Full Name, Mailing Address and ZIP Code RICHARD D OCHELTREE 9801 RIDGE MEADOW PLACE RICHMOND, VA 23233 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00 (\$30.00) Semi-monthly
D. Full Name, Mailing Address and ZIP Code THOMAS HENRY PACER 3040 ANDREWS DRIVE, NW ATLANTA, GA 30305 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 250.00 (\$125.00) Semi-monthly
E. Full Name, Mailing Address and ZIP Code JOHN C PEARCE III 7836 JAMES ISLAND TRAIL JACKSONVILLE, FL 32256 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FU MORTGAGE CORPORATION Occupation Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly
F. Full Name, Mailing Address and ZIP Code FREDERICK H PENNEKAMP 17703 SPINNAKERS REACH DR CORNELIUS, NC 28031 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST UNION CORPORATION Occupation Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly
G. Full Name, Mailing Address and ZIP Code MANUEL F PEREZ-CARRILLO 3551 S W 141 AVENUE MIAMI, FL 33175 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FUNB Occupation Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00) Semi-monthly

SUBTOTAL of Receipts This Page (optional) **512.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government Fund

<p>A. Full Name, Mailing Address and ZIP Code FLORA B PHILLIPS 8008-B GROVE AVE.WEST RICHMOND, VA 23226</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$60.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code DAVID S POWELL 8906 CYPRESS FOREST DR CHARLOTTE, NC 28216</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code LARRY C PRINCE 11878 OLDE OAKS CT. S. JACKSONVILLE, FL 32223</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code CAPERTON PUTT 3131 FARMINGTON DR. ATLANTA, GA 30339</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code JOSEPH F READY 9300 - C. OTTER CREEK DR. CHARLOTTE, NC 28277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code ROBERT L REID 414 HILLBROOK ROAD BRYN MAWR, PA 19010</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION NATIONAL BANK</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 975.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>150.00</p> <p>(\$75.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code HOYT EUGENE RENNO 3508 LAKESTONE CT AUGUSTA, GA 30907</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional) 400.00

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code CHARLES O RIVERS 34 CONIFER LN P O BOX 1211 AUGUSTA, GA 30813</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 504.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>84.00</p> <p>(\$42.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code WAYNE F ROBINSON 1901 CRAIGMORE DRIVE CHARLOTTE, NC 28226</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$50.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code PATRICK ROSS 2617 N.E. 27TH AVE FT LAUDERDALE, FL 33305</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code GERALD S SALLEY 413 DELLBROOKS PLACE RICHMOND, VA 23233</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 420.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>84.00</p> <p>(\$42.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code LINDA C SEIGEL 8007 SHARON RD CHARLOTTE, NC 28210</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code DEBORAH R BHOBE 5706 CRICKET PLACE MCLEAN, VA 22101</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code BRIAN E SIMPSON 537 COLVILLE ROAD CHARLOTTE, NC 28207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional) 428.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code MICHAEL C BLOSUM 1855 CHALLENGE AVE JACKSONVILLE, FL 32205</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Amount of Each Receipt This Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code MATTHEW ROBERT STARK 19717 SCHOONER DRIVE CORNELIUS, NC 28031</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code CARLYLE E. STULL JR. 3306 HOLLYFIELD CIRCLE ROANOKE, VA 24018</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 200.00</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code TIGHE P. SULLIVAN 118 FIVE MILE RIVER RD DARIEN, CT 06820</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CAPITAL MARKETS</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code JESSE F TART JR 1337 BROOKHAVEN GARDENS LANE ATLANTA, GA 30310</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 504.00</p>	<p>Amount of Each Receipt This Period</p> <p>34.00</p> <p>(\$42.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code MAURICE F TERBRUEGGEN JR 11780 MANDARIN FOREST DR JACKSONVILLE, FL 32223</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Amount of Each Receipt This Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code NICHOLAS A TESTONI 9855 HIDDEN ESTATES COVE VIENNA, VA 22181</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 480.00</p>	<p>Amount of Each Receipt This Period</p> <p>80.00</p> <p>(\$40.00)</p> <p>Semi-monthly</p>

SUBTOTAL of Receipts This Page (optional) 384.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code MARGARET JANE THARRINGTON 10886 CREEKVIEW DRIVE JACKSONVILLE, FL 32225	Name of Employer FUNB	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Payroll Deduction	40.00 (\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		Semi-monthly
B. Full Name, Mailing Address and ZIP Code RICHARD A TONETTI 135 GREENWOOD DRIVE WEST PALM BEACH, FL 33405	Name of Employer FUNB	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Payroll Deduction	34.00 (\$17.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 204.00		Semi-monthly
C. Full Name, Mailing Address and ZIP Code JAMES M TURK 4663 ALGONQUIN AVE JACKSONVILLE, FL 32210	Name of Employer FUNB	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Payroll Deduction	50.00 (\$25.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		Semi-monthly
D. Full Name, Mailing Address and ZIP Code PEGGY G TYSON 31 EAST SQUARE LANE RICHMOND, VA 23233	Name of Employer FUNB	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Payroll Deduction	50.00 (\$25.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		Semi-monthly
E. Full Name, Mailing Address and ZIP Code MARSHALL VERMILLION 1146 VIA CAPRI WINTER PARK, FL 32789	Name of Employer FUNB	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Payroll Deduction	50.00 (\$25.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		Semi-monthly
F. Full Name, Mailing Address and ZIP Code JORGE R VILLACAMPA 1410 MENDAVIA AVE. CORAL GABLES, FL 33146	Name of Employer FUNB	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Payroll Deduction	60.00 (\$30.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		Semi-monthly
G. Full Name, Mailing Address and ZIP Code SUSAN M WALKER 10133 THOMAS PAYNE CIRCLE CHARLOTTE, NC 28277	Name of Employer FUNB	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Payroll Deduction	50.00 (\$25.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		Semi-monthly

SUBTOTAL of Receipts This Page (optional) **324.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund

<p>A. Full Name, Mailing Address and ZIP Code JOHN T. WATTS 817 SOUTH WILLOW AVENUE TAMPA, FL 33606</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION SERVICES, INC.</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>60.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>B. Full Name, Mailing Address and ZIP Code LARRY J WERTZ 2127 RIVER ROAD JACKSONVILLE, FL 32207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>100.00</p> <p>(\$50.00)</p> <p>Semi-monthly</p>
<p>C. Full Name, Mailing Address and ZIP Code JOHN W WHITE 1040 POPLAR CIRCLE FORT LAUDERDALE, FL 33329</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>D. Full Name, Mailing Address and ZIP Code GWYNNE T WHITLEY 11413 MARCOURT TERRACE RICHMOND, VA 23233</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 304.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>84.00</p> <p>(\$42.00)</p> <p>Semi-monthly</p>
<p>E. Full Name, Mailing Address and ZIP Code WILLIAM T WOOD 4397 KELNEPA DR JACKSONVILLE, FL 32207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FUNB</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00</p> <p>(\$20.00)</p> <p>Semi-monthly</p>
<p>F. Full Name, Mailing Address and ZIP Code DAVID S WORLEY III 719 STANHOPE LANE MATTHEWS, NC 28105</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>
<p>G. Full Name, Mailing Address and ZIP Code THOMAS J WURTZ 140 CEDAR BLUFF LANE MOORESVILLE, NC 28117</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FIRST UNION CORPORATION</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>50.00</p> <p>(\$25.00)</p> <p>Semi-monthly</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>424.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>7,843.00</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "P" Fund

A. Full Name, Mailing Address and ZIP Code DREIER FOR CONGRESS P O BOX 1110 COVINA, CA 91722	Purpose of Disbursement DAVID DREIER, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000303	Date (month, day, year) 08/08/93	Amount of Each Disbursement This Period 2,500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

GUBTOTAL of Disbursements This Page (optional)

2,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF JIM MALONEY 240 MAIN STREET, SUITE 3 DANBURY, CT 06810	JIM MALONEY, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000310	06/26/89	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code DEMOCRATIC SENATORIAL CAMPAIGN CMTE 436 SOUTH CAPITOL ST, S E WASHINGTON, DC 20003	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F50000-179	Date (month, day, year) 06/21/99	Amount of Each Disbursement This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement MICHAEL N. CASTLE, U.S. HOUSE	Date (month, day, year)	Amount of Each Disbursement This Period
CASTLE CAMPAIGN FUND P O BOX 133 WILMINGTON, DE 19880	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F0000255	02/28/99	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
Final Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BILL MCCOLLUM CAMPAIGN 1501 LEE ROAD SUITE 301 WINTER PARK, FL 32789	BILL MCCOLLUM, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000072	06/28/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

BUBTOTAL of Disbursements This Page (optional)

1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "P" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ISAKSON FOR US SENATE P O BOX 2274 6066 ROSWELL ROAD ATLANTA, GA 30328	JOHNNY ISAKSON, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000220	08/28/99	500.00
ISAKSON FOR US SENATE P O BOX 2274 6066 ROSWELL ROAD ATLANTA, GA 30328	JOHNNY ISAKSON, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000220	08/28/99	-500.00
ISAKSON FOR US SENATE P O BOX 2274 6066 ROSWELL ROAD ATLANTA, GA 30328	JOHNNY ISAKSON, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000220	08/28/99	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "P" Fund

A. Full Name, Mailing Address and ZIP Code BAKER FOR CONGRESS P O BOX 1894 BATON ROUGE, LA 70821	Purpose of Disbursement RICHARD H. BAKER, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000296	Date (month, day, year) 08/28/99	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "P" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WALTER B JONES CAMPAIGN P O BOX 668 FARMVILLE, NC 27828	WALTER B JONES, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000296	08/08/99	1,000.00
MEL WATT FOR CONGRESS 700 E STONEWALL SUITE 600 CHARLOTTE, NC 28202	MEL WATT, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000119	06/09/99	1,000.00
SUE MYRICK FOR CONGRESS COMMITTEE P O BOX 37091 CHARLOTTE, NC 28237	SUE MYRICK, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000080	08/21/99	1,000.00
DAVID PRICE CAMPAIGN P O BOX 1284 RALEIGH, NC 27602	DAVID PRICE, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000091	06/26/99	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursement(s) This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "P" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KERREY FOR U.S. SENATE COMMITTEE 7402 PACIFIC STREET LOWER LEVEL B OMAHA, NE 68114	BOB KERREY, U.S. SENATE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000358	08/08/98	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code COMMITTEE TO REELECT MARGE ROUKEMA P O BOX 625 RIDGEWOOD, NJ 07451	Purpose of Disbursement MARGE ROUKEMA, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000217	Date (month, day, year) 08/28/99	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
RICK LAZIO FOR CONGRESS 4451 BROOKFIELD CORPORATE DRIVE SUITE 200 CHANTILLY, VA 22024	RICK LAZIO, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000212	06/09/99	1,000.00
SUE KELLY FOR CONGRESS P O BOX 898 KATONAH, NY 10538	SUE KELLY, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000318	06/28/98	1,000.00
MALONEY FOR CONGRESS 230 PARK AVENUE 34TH FLOOR NEW YORK, NY 10169	CAROLYN S. MALONEY, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000147	09/28/99	500.00
COMMITTEE TO REELECT NYDIA VELAZQUEZ 943 CARROLL STREET BROOKLYN, NY 11215	NYDIA VELAZQUEZ, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000233	06/23/99	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement DEBORAH PRYCE, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): F00000361	Date (month, day, year) 08/28/98	Amount of Each Disbursement This Period 500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

First Union Corporation Employees Good Government™ Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PAT TOOMEY FOR CONGRESS 1005 UNION BLVD ALLENTOWN, PA 18103	PAT TOOMEY, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000339	06/09/98	600.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code WEYGAND COMMITTEE P.O. BOX 7818 WARWICK, RI 02887	Purpose of Disbursement ROBERT A. WEYGAND, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F00000336	Date (month, day, year) 05/28/99	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KEN BENTSEN, JR FOR CONGRESS 5615 MORNINGSIDE, #301 WASHINGTON, DC 20013	KEN BENTSEN, U.S. HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F0000234	08/02/99	600.00
B. Full Name, Mailing Address and ZIP Code GEORGE W. BUSH PRESIDENTIAL EXP. COMM. P. O. BOX 1902 AUSTIN, TX 78767	GEORGE W. BUSH, PRESIDENT OF U.S. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) F0000360	08/25/99	2,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2,500.00

TOTAL This Period (last page this line number only)

25,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>7-20-99</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SEL</i> PREPARER	<i>7-20-99</i> DATE PREPARED